

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 1.53(b))

Attorney Docket No.	37505.0323
First Inventor	Syracuse et al.
Title	Methods To Improve Efficiency Of Lithium Silver Vanadium Oxide Cell Discharge Energy In Implantable Medical Device Applications
Express Mail Label No.	ER 600255625 US

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents

**ADDRESS TO:** Commissioner for Patents  
Box Patent Application  
Washington, D.C. 20231

1. ☒ Fee Transmittal Form  
(Submit an original, and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.  
See CFR 1.27.
3. ☒ Specification [Total Pages 25 / ]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R&D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 USC 113) [Total Sheets 1 / ]
5. ☒ Oath or Declaration [Total Pages 3 / ]
  - a. ☒ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 18 completed)
  - i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a. ☐ Computer Readable Form (CRF)
  - b. ☐ Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☐ paper
  - c. ☐ Statements verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

9. ☒ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney  
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure ☐ Copies of IDS  
Statement (IDS)/PTO-1449 Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122  
(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent
17. ☒ Other: Credit Card Forms for \$40.00 and \$770.00

**18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:**

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of the prior application No: 1

Prior application information: Examiner: \_\_\_\_\_ Group/Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

<input checked="" type="checkbox"/> Customer Number or Bar Code Label 33751		OR <input type="checkbox"/> Correspondence address below			
NAME		Michael F. Scalise			
		Wilson Greatbatch Technologies, Inc.			
ADDRESS		10,000 Wehrle Drive			
CITY	Clarence	STATE	New York	ZIP CODE	14031
COUNTRY	USA	TELEPHONE	(716) 759-5810	FAX	(716) 759-5074
Name (Print/Type)	Michael F. Scalise	Registration No. (Attorney/Agent)	34,920		
Signature	<i>Michael F. Scalise</i>	Date	February 10, 2004		

"Express Mail" Mailing Label Number ER 600255625 US

Date of Deposit February 10, 2004

I hereby Certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Alexandria, VA 22313-1450.

Rosemarie Contella  
Name*Rosemarie Contella*  
Signature

021004

PTO/SB/17 (11/01) Approved for use through 10/31/2002, OMB 0651-

8032

**FEE TRANSMITTAL  
for FY 2002**

Patent Fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$810.00)

Application Number

Filing Date

February 10, 2004

First Named Inventor

Syracuse et al.

Examiner Name

Group/Art Unit

Attorney Docket Number

37505.0323

**METHOD OF PAYMENT (check all that apply)**☐ Check ☐ Credit Card ☒ Money Order ☐ Other ☐ NoneDeposit Account: Deposit Account Number: 502460

Deposit Account Name: \_\_\_\_\_

The Commissioner is hereby authorized to (check all that apply)

☒ Charge fee(s) indicated below

Charge any fee deficiencies or credit any overpayments

☐ Charge any additional fees during pendency of this application.☒ Charge fees indicated below, except for the filing fee to the above-identified deposit account**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Small Entity

Fee Fee Fee Fee

Code (\$) Code (\$) Fee Description

Fee

Paid

101 770 201 385 Utility filing fee \$770

106 340 206 170 Design filing fee \$

107 530 207 265 Plant filing fee \$

108 770 208 385 Reissue filing fee \$

114 160 214 80 Provisional filing fee \$

SUBTOTAL (1) \$770

**2. EXTRA CLAIM FEES FOR UTILITY/ REISSUE**

Extra Fee from

Claims below

Total Claims /20 / - 20\*\* = /0 / x / / = \$

Independent Claims /3 / - 3\*\* = /0 / x / / = \$

Multiple dependent / / x / / = \$

Large Entity Small Entity

Fee Fee Fee Fee

Code (\$) Code (\$) Fee Description

103 18 203 9 Claims in excess of 20

102 86 202 43 Independent claims in excess of 3

104 290 204 145 Multiple dependent claim if not paid

109 86 209 43 \*\*Reissue independent claims over original patent

110 18 210 9 \*\*Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$

SIGNATURE: 

Michael F. Scalise Reg. No. 34,920

DATE: February 10, 2004 Telephone: (716) 759-5810

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity

Small Entity

Fee

Fee

Fee

Fee

Fee Description

Fee

Paid

105

130

205

65

Surcharge - late filing fee or oath

\$

127

50

227

25

Surcharge - late provisional filing fee or cover sheet

\$

139

130

139

130

Non-English specification

\$

147

2,520

147

2,520

For filing a request for *ex parte* reexamination

\$

112

920\*

112

920\*

Requesting Publication of SIR prior to Examiner Action

\$

113

1,840\*

113

1,840\*

Requesting Publication of SIR after Examiner Action

\$

115

110

215

55

Extension for reply within first month

\$

116

420

216

210

Extension for reply within second month

\$

117

950

217

475

Extension for reply within third month

\$

118

1,480

218

740

Extension for reply within fourth month

\$

128

2,010

228

1,005

Extension for reply within fifth month

\$

119

330

219

165

Notice of Appeal

\$

120

330

220

165

Filing a brief in support of an appeal

\$

121

290

221

145

Request for oral hearing

\$

138

1,510

138

1,510

Petition to institute a public use proceeding

\$

140

110

240

55

Petition to revive - unavoidable

\$

141

1,330

241

665

Petition to revive - unintentional

\$

142

1,330

242

665

10 advance copies

\$

143

480

243

240

Design issue fee

\$

144

640

244

320

Plant issue fee

\$

122

130

122

130

Petitions to the Commissioner

\$

123

50

123

50

Processing fee under 37 CFR 1.17(q)

\$

126

180

126

180

Submission of Information Disclosure Statement

\$

581

40

581

40

Recording each patent assignment per property (times number of properties)

\$40

146

770

246

385

Filing a submission after final rejection(37 CFR 1.129(a))

\$

149

770

249

385

For each add'l invention to be examined(37 CFR 1.129(b))

\$

179

770

279

385

Request For Continued Examination (RCE)

\$

169

900

169

900

Request for Expedited Examination of a design appln.

\$

Other fee (specify)

\$

\*Reduced by basic filing fee paid

SUBTOTAL (3)

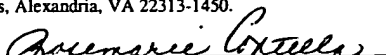
\$40

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Rosemarie Contella

Name

  
Signature

February 10, 2004

Date of Signature